

Ouachita Parish
Notarial Examining Committee

OFFICIAL
FILE COPY

DO NOT SIGN

AFFIDAVIT

A. Personally came and appeared before the undersigned authority, Carol D. Powell Lexing (officer), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Ouachita Parish Notarial Examining Committee as of December 31, 2004, and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements. Please complete the revenue certification portion below.

REVENUE CERTIFICATION - for selection A only

In addition, Carol D. Powell Lexing, (officer), who, duly sworn, deposes and says that Ouachita Parish Notarial Examining Committee received \$50,000 or less in revenues and other sources for the year ended December 31, 2004, and accordingly, is not required to have an audit for the previously mentioned year.

Or

B. Personally came and appeared before the undersigned authority, _____ (officer), who, duly sworn, deposes and says that the _____ Parish Notarial Examining Committee received no revenues and had no expenses for the year ended December 31, 2004, and accordingly, is not required to provide its financial statements to the Legislative Auditor for the previously mentioned year.

Or

C. Personally came and appeared before the undersigned authority, Carol D. Powell Lexing (officer), who, duly sworn, deposes and says that all the revenues and expenditures of the Ouachita Parish Notarial Examining Committee are reported and audited with the (circle one) Clerk of Court / Custodian of Notarial Records or with another entity Ouachita Parish Notarial Comm, for the year ended December 31, 2004, and accordingly, is not required to provide its financial statements to the Legislative Auditor for the previously mentioned year.


Signature (of officer)

Sworn to and subscribed before me (notary public) this 2 day of May, 2005


NOTARY PUBLIC (Signature and Seal)
Martha E. Tribble

Please Complete this Section:

Officer's Name Carol D. Powell Lexing
Street or P.O. Box 141 Desiard Street Suite 806
City, State Zip Monroe, La 71201
Telephone No. (318) 324-1070
Fax No. / e-mail _____

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. This report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Statement A

Carol D. Powell Lexing (Officer Name)
Chairperson (Officer Title) of the Ouachita (Parish)
 Parish Notarial Examining Committee

Balance Sheet, December 31, 2004

	General Fund
ASSETS	
Cash and cash equivalents on hand	\$ 0.00
Investments (fair value) on hand	0.00
Office furnishings (Cost of desks, etc.)	0.00
Equipment (Cost of fax machine, etc.)	0.00
Total Assets	A \$ 0.00
LIABILITIES AND FUND BALANCE	
Liabilities:	
Cash overdraft	\$
Salaries payable	
Accounts payable	
Other liabilities—	
Total Liabilities	B \$0.00
Fund balance (See below)	C \$0.00
Total Liabilities and Fund Balance (B plus C)	D \$0.00

C - This amount should agree with the Fund Balance at
 the end of the year on Statement B, amount [E].

Carol D. Powell Lexing (Officer Name)
 Chairperson (Officer Title) of the Ouachita (Parish)
 Parish Notarial Examining Committee

**Statement of Cash Receipts and Disbursements
 For the Year Ended December 31, 2004**

	General Fund
CASH RECEIPTS	
Examination fees collected	1420.00
Interest earned	\$ 0.00
Other receipts (describe):	0.00
Total cash receipts	A \$ 1420.00
OFFICE DISBURSEMENTS	
Salaries paid	\$ 0.00
Fees paid to proctors	0.00
Materials and supplies (stationery, postage, etc)	442.00
Travel and related charges	0.00
Capital outlay (cost of purchases of equipment, etc)	0.00
Other disbursements (describe): Fees to Law Clerk for Grading	413.00
Examination preparation Fees	565.00
Total office disbursements	B \$ 1420.00
Increase or (decrease) in fund balance (A less B)	C \$
Fund Balance at the beginning of the year (see below)	D \$ 0.00
Fund balance (or deficit) at end of the year (C plus D)	E \$ 0.00

D - This is the amount of the Fund Balance (or deficit balance) at the end of your prior year
E - This amount should agree with the Fund Balance amount [C] in Statement A.